



## Application Data Sheet

### **Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Group Art Unit:: 2876  
Suggested Classification:: 235/379  
Title:: CASH DISPENSING AUTOMATED BANKING  
MACHINE WITH TILT OUT FASCIA  
Attorney Docket Number:: D-1221 R5  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure:: 39  
Total Drawing Sheets:: 97  
Small Entity:: No  
Petition included?:: No  
Secrecy Order in Parent Appl.?:: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Mark  
Middle Name::  
Family Name:: Douglass  
Name Suffix::  
City of Residence:: North Canton  
State or Province Of Residence:: OH  
Country of Residence:: US  
Street of mailing address:: 1037 Bel Air Drive NW  
City of mailing address:: North Canton  
State or Province of mailing address:: OH  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 44720

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: James  
Middle Name::  
Family Name:: Booth  
Name Suffix::  
City of Residence:: Kimbolton  
State or Province Of Residence:: OH  
Country of Residence:: US  
Street of mailing address:: 13223 Egress Road  
City of mailing address:: Kimbolton  
State or Province of mailing address:: OH  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 43749

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: MX  
Status:: Full Capacity  
Given Name:: Pedro  
Middle Name::  
Family Name:: Tula  
Name Suffix::  
City of Residence:: North Canton  
State or Province Of Residence:: OH  
Country of Residence:: US  
Street of mailing address:: 1118 Lindylane Ave. SW  
City of mailing address:: North Canton  
State or Province of mailing address:: OH  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 44720

**Correspondence Information**

Correspondence Customer Number:: 28995

**Representative Information**

Representative Customer Number:	28995
---------------------------------	-------

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Date Filing::
This Application	An application claiming the benefit under 35 USC 119(e)	60/453,667	03/10/2003

**Assignee Information**

Assignee Name:: Diebold Self-Service Systems  
Division of Diebold, Incorporated  
City of mailing address:: North Canton  
State or Province of mailing address:: OH